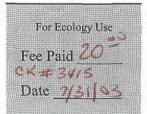


State of Washington 3 1 2003

Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.



1 of 2 Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM H.C. BURKHOLDER Home Tel: (509) 996 - 3318 Mailing Address P.O. Box 886 Work Tel: (206) 282 6340 City WINTHROP State WA Zin+4 98862 + 0886 FAX:() -Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION ☑-Same as above Home Tel:(Name Mailing Address Work Tel:() -City State Zip+4 + FAX:() -Relationship to applicant Section 3. STATEMENT OF INTENT AMOUNT PRESENT IN SEASONAL PONDS The applicant requests a permit to use not more than AT TIME OF USE (gallons per minute or □ cubic feet per second) from a □ surface water source or □ ground water source (check only one) for the purpose(s) of IRRIGATION, STOCK WATERING. ATTACH A "LEGAL"

DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel number or a plat number is not Estimate a maximum annual quantity to be used in acre-feet per year: Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed; From / / to / / Section 4. WATER SOURCE If SURFACE WATER If GROUNDWATER Name the water source and indicate if stream, spring, A permit is desired for well(s). lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.: PATTY'S POND AND "UNNAMED POND" Number of diversions: Source flows into (name of body of water): Size & depth of well(s):

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PONDS DESCRIBED ABOUT

APPLICATION

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Appl. No.: 34-34916

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LOC	CATION						Europa Selaste	limereli .		
Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: PATTY'S POND IS NEAR PAR NORTHERN END OF PROPERTY "UNDAMED POND" IS TO WEST OF ROAD NEAR SOUTHERN BOUNDARY										
1/4		Section	Township	Range(E/W)	County	If location of sou	urce is platted, com below: Subdivisio	plete		
	SOUTH EAST QUARTER	20	34	215	OKANOGAN		TON PLUS			
	JOUTH WEST QUARTER	21	34	2113	OKANOGIAN	MINIOTON MINIOTON	6- 2.5 ACR	E)		
For Ec	ology Use Date Rec	eived: ULS	131,200	3 Priority	Date: JULY 3/10	2003	OKANOE	5AN		
	Exempt/Not Exempt ccepted As Complete	FERC Licens 0/08/03	e# By	Date R	Dept. Of Health #eturned		- TRIA: 48			
Section 5. GENERAL WATER SYSTEM INFORMATION										
A.	A. Name of system, if named:									
B.	Briefly describe your proposed water system. (See instructions.)									
	WATER IN PONDS WOULD BE USED FOR STOCK WATERING, AS IS									
	SOME WATER COULD BE PUMPED ONTO ADJOINING LAND									
	FOR IRRIGIATION PURPOSES									
C.	Do you already have any water rights or claims associated with this property or system? ☐ YES ☑ NO PROVIDE DOCUMENTATION.									
Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)										
A.	Number of "conr	nections" red	quested:	О Туре	e of connection	Tomas Amoutus	nt Dagmastianal			
В.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational, etc.) Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.									
Com	plete C. and D.	only if th	e propose	d water sys	tem will have fift	een or more o	connections.			
C.	Do you have a cu Washington Stat If yes, when was	e Departme	nt of Health	?	the se attach the current	approved version	☐ YES In of your plan.	M NO		

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D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan. □ YES ☒ NO
030000000000000000000000000000000000000	ion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION mplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated: 47.5 FOR SILVACULTURE N 55 ACRES IN ALIZEADY "DESIGNATED FOREST LAND"
B.	List total number of acres for other specified agricultural uses:
	Use GRAZING STOCK Acres 102.5 Use Acres Acres
C.	Total number of acres to be covered by this application: 162.5
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 6000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals Animal type CATTLE (If dairy cattle, see below) Dairy - # Milking # Non-milking
	Section 8. WATER STORAGE
Will yo	ou be using a dam, dike, or other structure to retain or store water?
some po	If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and ortion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit tion from the Department of Ecology.
Sect	ion 9. DRIVING DIRECTIONS
DRI'S TWI ON	e detailed driving instructions to the project site. WING NORTH FROM TWISP ON STATE ROUTE 20, TURN LEFT ON IN LAKES ROAD, LEFT ON PATTERSON LAKE ROAD, LEFT ELBOW COULTE ROAD. SITE IS SOUTH OF PINE FOREST BADIVISION ON BOTH SIDES OF ROAD

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Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP YES NO A. Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s): YES NO B. Does the applicant own the land on which the water source is located? If no, submit a copy of agreement: I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

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Applicant (or authorized representative)

SAME

Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following	reason(s):						
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128					
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE					
Explanation:							
Please provide the additional information requested above and return your application by (date).							
Ecology staff Date							

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

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